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Attorney's Docket No. 032642-004

pplicant or Fi	stomes: COLIN LESILE TOUNG
	Potent No.1
	USC REPELLENT
	STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS C.F.R. 55 1.9(f) AND 1.27(c)) - SMALL BUSINESS CONCERN
hereby dedi	ere that I am
izel [ ]	the owner of the small business concern identified below: an official of the small business concern empowered to act on behalf of the concern identified below:
NAME OF C	ONCERN Multicrop (Aust.) Pty Ita
ADDRESS D	F CONCERN 926 Mountain Highway, Bayswater, Victoria, 31211
concern 66 d and 41(b) 6 including the the number the concern.	clare that the above-identified email business concern qualifies as a small business concern qualifies as a small business clared in 13 C.F.R. § 1.21 for purposes of paying reduced fees under Sections 41(a) defined in 13 C.F.R. § 1.21 for purposes of paying reduced fees under Sections 41(a) if Title 35, United States Code, in that the number of employees of the statement, (1) ose of its affiliates, does not exceed 600 persons. For purposes of this statement, (1) of employees of the business concern is the average, over the previous fiscal year of employees of the business concern is the average, over the previous fiscal year of the persons employed on a full-time, part-time, or temporary basis during each ode of the fiscal year, and (2) concerns are affiliates of each other when either, directly one concern controls or has the power to control the other, or a third party or parties, one concern controls or has the power to control the other, or a third party or parties.
or Indirectly	has the power to control both.
or Indirectly controls or	has the power to control both.  clare that rights under contract or law have been conveyed to and remain with the smaller that rights under contract or law have been conveyed to and remain with the smaller that rights under contract or law have been conveyed to and remain with the smaller that rights above with regard to the invention entitled by inventor(s) describe
or indirectly controls or i heraby dec business on	the specification filed herewith  Application No, filed,

If the rights held by the above-identified small business concern are not exclusive, each individual, concern, or organization having rights to the invention is listed below,\* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. § 1.9(o), or by any concern that would not qualify as either a small business concern under 37 C.F.R. § 1.9(d) or a nonprofit organization under 37 C.F.R. § 1.9(e).

\*NOTE: Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 C.F.R. 9 1.27.)

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Application No. \_032642-004

NAME				
address	[ ] Individual	[ ] email business concern	( ) nonprofit erganization	
NAME				_
ADDRESS -	[ ] Individual	[ ] small business concern	1 nonprofit organization	

i acknowledge the duty to file, in this application or parent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earlier of the issue fee and any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. § 1.28(b).)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the velidity of the application, any patent lesuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING COLIN LESSLE YOU TITLE OF PERSON OTHER THAN OWNER CORRUST ADDRESS OF PERSON SIGNING 27 Raypolds 1	Table
Austrolla SIGNATURE	DATE

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Attorney's Docket No. COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY Includes Reference to Providence and PCT Improvidence Applications) 032642 • 004 As a below named inventor, I hereby declare that:

My residence, post office address and chizzonino are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and sole inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: MOLLUSC REPELLENT the specification of which (check only one item below): ls ameled hereto. was filed as United States application Number \_\_ and was amended (if applicable). 01 Was filed as PCT international application Number PCT/AU99/00651 11 August, 1999 and was amended (if applicable). I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims. as amounted by any amendment reformed to shows. I admowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Pederal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, \$119 (a)-(a) of any foreign application(a) for restant or inventor's certificate or of any PCT international application(s) designating at least one country other than the patient of inventor's foreign application(s) for patent or inventor's continued States of America listed below and have also identified below any foreign application(s) for patent or inventor's continued applications of a patient of the states of America States of Am control of the same subject traiter having a filing date before that of the application(s) of which priority is claimed: PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. \$119: PRIORITY CLAIMED UNDER 35 U.S.C. 1119 DATE OF FILING COUNTRY (day, month, year) APPLICATION NUMBER BY PCT, Indicate "PCT" x No Ya 11/8/1998 PP 5183 Australia Yes Nο No Yes No Yes No Yes I hereby claim the benefit under Title 35, United States Code & 119(e) of any United States provisional application(s) listed below. (Filing Date) (Application Number) (Piling Date) (Application Number)

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